Form **8871**(July 2000)

For Paperwork Reduction Act Notice, see page 4.

Political Organization Notice of Section 527 Status

OM8 No.-1545-1693

Form 8871 (7-2000)

General Information			
4 Name of occapization			E-sia idadigada
Jean Leisin	of for State Rep	resentative	Employer identification number 91+2085282
P.O. BOX S	<u> 3</u>	ımber)	
City or town, state, and ZIP code	e, IN 4700	, 6	
3 E-mail address of organization			
4a Name of custodian of records	4b Cust	odian's address	
Same as abo	ve		
5a Name of contact person		act person's address	
Same as abou	,e		
6 Business address of organizatio	n (if different from mailing addres	s shown above). Number, street	, and room or suite number
City or town, state, and ZIP cod	е		
Purpose			
7 Describe the purpose of the org	anization		
·	for State re,		·
•	t income - a		sed Spent
tor	campaign pu	rposes	
•			
List of All Related	Entities (see instructions)	***************************************	
8a Name of related entity	8b Relationship	8c Address	
			••••••••••••••••
RECEIVED			•••••••••••••••••••••••••••••••••••••••
NOV 3 2 2000			
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OGDEN. DI	Ì		

Cat. No. 30405V

List of All Officers, Directors, and Highly Compensated Employees (see instructions)		
9c Address	- 9b Title	la Name
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Revenue Code, and that I have examined this notice, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Sign Here